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To: All Infectious Disease Specialists and HIV Clinics

RE: Trofile Assay

The Trofile Assay will be a covered service by Medicaid with prior authorization effective December 1, 2008. The procedure code to be billed is 87999 (unlisted microbiology procedure). In order to be reimbursed by Medicaid for the Trofile Assay, the ordering provider must submit a Prior Authorization electronically or by paper on form 342. The form is available on the Agency's website at:

http://www.medicaid.alabama.gov/documents/Billing/5-F_Forms.Billing/5F-2_Prior.Auth.Forms/5F-2a_PA_Form342_fillable-2-26-08.pdf

Providers requesting a PA should include:

- Any past history of antiretroviral medications prescribed to include date prescribed and the date the drug was discontinued;
- The name and contact information of the HIV clinic that the provider is affiliated with if the requesting provider is not enrolled in Medicaid with specialty of infectious disease, and;
- The result of the most current HIV-1 RNA.

If you need further information, please see chapter 4 of the Provider Billing Manual for detailed instructions on the submission of prior authorizations. Providers with questions may contact Teresa Thomas, Program Manager, Lab/X-ray services at teresa.thomas@medicaid.alabama.gov or by phone at (334) 242-5048.

December 02, 2008